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CONFIRMATION NO. 6849

<b>SERIAL NUMBER</b> 10/521,063	<b>FILING OR 371(c) DATE</b> 10/16/2006 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3774	<b>ATTORNEY DOCKET NO.</b>
<b>APPLICANTS</b> Whye-Kei Lye, Charlottesville, VA; Michael L. Reed, Charlottesville, VA; Mark H. Wholey, Oakmont, PA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/21611 07/11/2003 which claims benefit of 60/395,180 07/11/2002 and claims benefit of 60/421,404 10/24/2002 and claims benefit of 60/421,350 10/24/2002 and claims benefit of 60/428,803 11/25/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> VA	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 61
		<b>INDEPENDENT CLAIMS</b> 6		
<b>ADDRESS</b> WHYE-KEI LYE 1060 RAMBLEWOOD PLACE CHARLOTTESVILLE, VA22901				
<b>TITLE</b> Methods and apparatuses for repairing aneurysms				
<b>FILING FEE RECEIVED</b> 1690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	